



Docket No.: PF-016 USN

RECEIVED

JUN 30 2003

TECH CENTER 1000/2900

Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop: Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on June 24, 2003. By: [Signature] Printed: Katherine Stofer

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Tang et al.

Title: HUMAN TRANSMEMBRANE PROTEINS

Serial No.: 09/700,590

Filing Date: April 16, 2001

Examiner: Seharaseyon, J.

Group Art Unit: 1647

Mail Stop: Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

18/c
M.G.J
7/17/03

RESPONSE TO OFFICE ACTION

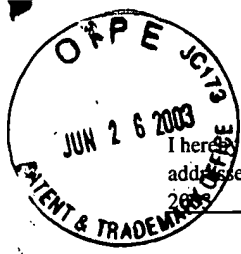
Sir:

This paper is responsive to the Office Action dated **March 25, 2003**. Applicant(s) request reconsideration of the above-referenced patent application in view of the following amendments and remarks.

IN THE CLAIMS

Please amend claims 21, 22, 25, 29, and 31 as follows.

For the Examiner's convenience, all pending claims are listed below. Attached hereto is a marked-up version of the changes made to the claims by the current amendment. The attached page is captioned "VERSION WITH MARKINGS TO SHOW CHANGES MADE."



Docket No.: PF-0526 USN

Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop: Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on June 24, 2003. By: [Signature] Printed: Katherine Stofer

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Tang et al.

Title: HUMAN TRANSMEMBRANE PROTEINS

Serial No.: 09/700,590

Filing Date: April 16, 2001

Examiner: Seharaseyon, J.

Group Art Unit: 1647

Mail Stop: Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL FEE SHEET

Sir:

Transmitted herewith are the following for the above-identified application:

1. Return Receipt Postcard;
2. Response to Office Action (37 pp.);
3. Eleven (11) References No. 1-11;
4. Two (2) Exhibits A and B;
5. Bedilion Declaration; and
6. Eight (8) Tabs A-H.

The fee has been calculated as follows:

Claims	Claims After Amendment		Claims Previously Paid For	=	Present Extra	Other Than Small Entity Rate	Fee	Additional Fee(s)
Total	20	-	20	=		x\$18.00		\$ 0
Indept.	2	-	3	=		x\$84.00		\$ 0
First Presentation of Multiple Dependent Claims:						+280.00		\$ 0
Total Fee:								\$ 0

☒ No additional Fee is required.

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17, or credit overpayment to Deposit Account No. 09-0108. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

INCYTE CORPORATION

Date: June 24, 2003[Signature]

Barrie D. Greene

Reg. No. 46,740

Direct Dial Telephone: (650) 621-75763160 Porter Drive

Palo Alto, California 94304

Phone: (650) 855-0555 or Fax: (650) 845-4166



27904